

FEC FORM 2  
STATEMENT OF CANDIDACY

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RECEIVED  
SECRETARY OF THE SENATE

1. (a) Name of Candidate (in full) Duckworth, L. Tammy, , ,			2. Candidate's FEC Identification Number S6IL00292	
(b) Address (number and street) PO Box 10793		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Chicago, IL 60610		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation DEM	5. Office Sought Senate	6. State & District of Candidate IL		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2022 election(s).  
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)  Tammy for Illinois
(b) Address (number and street)  PO Box 10793
(c) City, State, and ZIP Code  Chicago, IL 60610

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

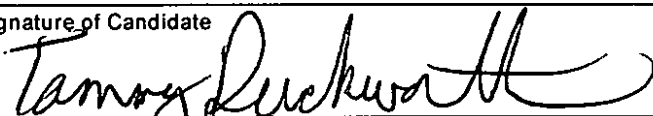
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)  Duckworth Victory Fund
(b) Address (number and street)  PO Box 59632
(c) City, State, and ZIP Code  Schaumburg, IL 60159

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 11/11/16
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Note: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C 437g.

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FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Illinois Victory 2016

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Illinois Missouri Victory 2016

(b) Address (number and street)

PO Box 548

(c) City, State, and ZIP Code

Columbia, MO 65205

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Women on the Road 2016

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

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# FORM 2S - STATEMENT OF CANDIDACY (SUPPLEMENTAL PAGE)

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NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2016 Senate IMPACT

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL] (Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Democratic Senate Victory 2016

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL] (Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Illinois Nevada Senate Victory

(b) Address (number and street)

611 Pennsylvania Avenue SE  
Suite 143

(c) City, State, and ZIP Code

Washington, DC 20003

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES [ADDITIONAL] (Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

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Blue Green Senate Victory

(b) Address (number and street)

120 Maryland Ave NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

IL NH Victory Fund

(b) Address (number and street)

PO Box 75357

(c) City, State, and ZIP Code

Washington, DC 20013

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Illinois Coordinated Victory Fund 2016

(b) Address (number and street)

PO Box 10933

(c) City, State, and ZIP Code

Chicago, IL 60610

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Durbin Duckworth Victory Fund

(b) Address (number and street)

101 W. Grand Ave

Ste 200

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(c) City, State, and ZIP Code

Chicago, IL 60654

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Schumer Committee for the Majority

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State, and ZIP Code

Washington, DC 20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Women Make the Majority 2016

(b) Address (number and street)

918 Pennsylvania Ave SE

(c) City, State, and ZIP Code

Washington, DC 20003

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Foxborough, MA 02035  
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# United States Senate

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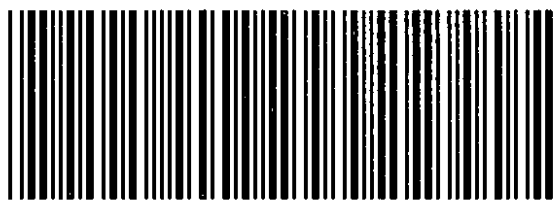
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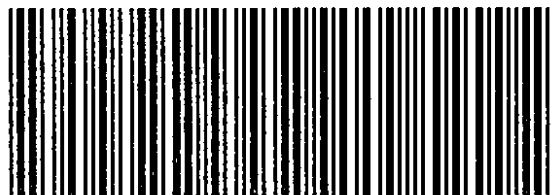
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